

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-676)

SERIAL NO.

1710874

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
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TOTAL IND.	9					
TOTAL DEP.	31					
TOTAL	40					

	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	..					
TOTAL DEP.						
TOTAL	12215261	11525261	12215261	11525261	12215261	11525261